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FOR ACTION

COUNTRY PROGRAMME RECOMMENDATION**

Burkina Faso

Addendum

SUMMARY

This addendum to the country note submitted to the Executive Board at its first regular session of 2000 contains the final country programme recommendation for approval by the Board.

The Executive Director recommends that the Executive Board approve an amount of $US 19,140,000 from general resources, subject to the availability of funds, and an amount of $US 19,867,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the Burkina Faso country programme for the period 2001-2005.

* E/ICEF/2000/14.

** The original country note provided only indicative figures for the estimated programme cooperation. The figures indicated in this addendum are final and reflect the unspent balances of programme cooperation at the end of 1999. These figures will be contained in the summary of recommended commitments for programmes to be financed from general resources and supplementary funding (E/ICEF/2000/P/L.27).

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SITUATION OF CHILDREN AND WOMEN

1. The analysis of the situation of children and women remains essentially the same as that described in the country note submitted to the Executive Board at its first regular session 2000 (E/ICEF/2000/P/L.4), which was based largely on the results of the last demographic and health survey (1998). However, some important factors have emerged since then.

2. The recent official launching of the satellite schools supported by UNICEF bears witness to the level of priority attached by the Government and its main development partners to basic education (formal and non-formal), which is now regarded as the essential motor of sustainable human development and poverty reduction. In addition, the progress of the HIV/AIDS epidemic, the prevalence of which is estimated at more than 7 per cent of the general population, is becoming a subject of increasing concern for the authorities. Although it has not yet reached the level of actual implementation, the process of decentralization which has been in progress since 1995 has accelerated with the discussion of the implementing texts to be adopted by the end of the year.

3. The programme cycles of the four agencies of the United Nations Development Group (UNDG) will be harmonized beginning in 2001, the date of launching of the United Nations Development Assistance Framework (UNDAF). A Common Country Assessment (CCA), based on the concept of analysis of the situation of children and women, is being finalized. The National Strategy Note (NSN) and inter-agency programming since 1997 in the fields of health and education have served as the basis for the preparation of UNDAF. In addition, on the initiative of the United Nations Development Programme (UNDP), the United Nations system has since 1998 established a joint intervention area for the education and health sectors. The choice of this area of convergence, which includes 11 provinces in the north and east of the country and covers 21 per cent of the population, is justified by low rates of school enrolment (20 per cent on average) and a human development indicator (0.151 to 0.181) lower than the national average (0.219).

4. In tandem with UNDAF, the Government is, since the end of 1999, engaged together with the Bretton Woods institutions and the donor community in the preparation of a Poverty Reduction Strategy Plan (PRSP) which is aimed at improving the economic environment of the poor, the development of social sectors, better governance and the coordination of aid. This document will serve as a basis for Burkina Faso's eligibility for the debt reduction initiative intended for heavily indebted poor countries (HIPC). Burkina Faso is among the nine countries, seven of them African, which have reached the "decision point". This debt reduction amounts to about $40 million a year for five years, which will be reinvested in the social sectors or for interventions aimed at poverty reduction. In view of the implications of these initiatives for the programming of the United Nations system a linkage between the UNDAF process and PRSP is being established.

PROGRAMME COOPERATION, 1996-2000

5. The lessons learned from past cooperation remain essentially the same as those described in the country note. Although the programme mobilized more than $16 million over five years, the 1998 mid-term review emphasized the ambitiousness of the goals in terms of available resources. The absence of actual decentralization has had as its consequence an over-vertical implementation of the national development programmes, chiefly at the central level; moreover, the weakness of the coordination machinery at the decentralized level has limited the possibilities for integrating sectoral and intersectoral interventions.

6. Thanks to the support of UNICEF and the financing of the Governments of Norway and the Netherlands, the establishment of the satellite schools has made possible the enrolment of 27,600 pupils, thus contributing to the increase of 4 per cent in the global rate of school enrolment, of which 2 per cent was for girls, between 1996 and 1998. The quality of the education in these schools has been consolidated, in order to ensure the replicability of the system. Two external assessments have indicated that the performance of the pupils is better than that of pupils in the regular system. This success is attributable to the use of national languages, geographic and cultural proximity and community participation. Since 1997 a satellite school experiment at Bisongo has been carrying out an integrated development project for children aged three to six.

7. The operational support initiated by UNICEF in the health districts of the eastern part of the country has made it possible to reduce maternal mortality in hospitals by 17 per cent in 18 months as part of the "emergency obstetrical care" project. The water/sanitation programme established intersectoral cooperation with the education programme by drilling wells and building school latrines in the satellite schools and, in cooperation with "Global 2000" and the World Health Organization (WHO), has contributed to a reduction of 40 per cent in the number of cases of dracunculiasis (Guinea worm) in nine endemic districts, without, however, making possible its eradication.

8. Almost 53,000 women trained in health, nutrition and hygiene and women's rights as a part of the support for the Women Community Leaders Network are now playing a major role as links with the community. Reinforced by the adoption in 1996 of the law prohibiting female genital mutilation, the campaign against the practice of excision has been considerably strengthened in seven provinces. Following the recommendations of the Committee on the Rights of the Child, UNICEF, in association with local non-governmental organizations (NGOs), has contributed to the improvement of the conditions of detention for minors in the Ouagadougou prison. Participation by children in the analysis of their problems was begun with the creation of a Children's Parliament. Lastly, the completion of the multiple indicator cluster survey (MICS) in 1996 has provided a reliable evaluation tool and will be repeated in 2000.

Lessons learned from previous cooperation

9. The lessons learned from previous cooperation remain essentially the same as those described in the country note. In order to integrate the "rights" dimension into the programme, and with a view to improving the impact and

efficiency of the programmes, a convergence of activities and greater intersectoral cooperation have been applied since 1998 in the area of intervention of the United Nations system. Special emphasis has been placed on improvement of the quality and effectiveness of education in the satellite schools, in order to ensure the durability and replicability of the system. Operational support of the peripheral health units through interventions making possible overall management and improvement of the quality of care have been continued.

10. The guidelines adopted by the programme following the mid-term review are oriented towards a vision based on the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women. The choice of the country's most disadvantaged provinces as the priority area of the interventions reflects the concern for equity with regard to the beneficiaries of the programme. The increased importance attached to the basic education programme, including its primary education dimension (satellite schools) and the part played by these schools as the point of entry for other interventions in the areas of health, sanitation, hygiene and the promotion of rights, testify to the desire to reduce the disparities between girls and boys, and thus to apply the principle of non-discrimination throughout the programme. The still high prevalence of dracunculiasis - in spite of good national safe water coverage - and the spread of the HIV/AIDS epidemic explain the importance attached to communication in support of the programme in order to induce the behavioural changes needed. Lastly, the establishment of a protection programme makes it possible both to pay greater attention to very vulnerable groups requiring special protective measures (including adolescents) and to progressively strengthen the implementation of the two Conventions within the cooperation programme.

RECOMMENDED PROGRAMME COOPERATION, 2001-2005

General resources: $US 19,140,000
Supplementary funding: $US 19,867,000

Recommended programme cooperation a/

(Thousands of United States dollars)

	General resources	Supplementary funding	Total
Basic education	2 980	7 140	10 120
Health and nutrition	3 400	7 080	10 480
Sanitation, safe water and environment	3 000	2 050	5 050
Legal and socio-economic protection of children and women	3 300	1 800	5 100
Communication for development	2 480	450	2 930
Social planning, monitoring and evaluation	2 000	450	2 450
Cross-sectoral costs	1 980	897	2 877
Total	19 140	19 867	39 007

a/ The breakdown of estimated annual expenditures appears in table 3.

Process of preparation of country programme

11. The process of preparation of the cooperation programme 2001-2005 began with the holding of the mid-term review in September 1998 under the leadership of the Ministry of the Economy and Finance. This was followed in May-June 1999 by a new analysis of the situation of children and women carried out on the basis of the "rights" and "gender" approaches. The formulation of the new programme began in July 1999 with the holding of retreats which resulted in the preparation of a strategy paper, which was approved in September 1999. The preparation of a framework plan of operations and sectoral plans of operation was approved in a pre-review at the end of February 2000. Most of the actors and technical and financial partners in the programme (including the NGOs, the United Nations system and the Governments of Canada, France and the Netherlands) took part in every stage of the process, which made possible a broad consensus on the future direction of the programme.

12. The cooperation programme falls within the framework for cooperation so far developed by the United Nations system, including the CCA and the UNDAF now being prepared. Since 1998 the agencies of the system have in fact shared a common area of intervention in the eastern part of the country, and cooperative programming in the health and education sectors have made it possible to establish the bases for interagency cooperation in that area of convergence since 1997. Complementary interventions are in progress with the United Nations Fund for Population Activities (UNFPA) in the field of reproductive health; with the World Food Programme (WFP) for the nutritional rehabilitation of children and food assistance to the most vulnerable groups; with WHO in the field of immunization, and with the Joint United Nations Programme on HIV/AIDS (UNAIDS). The implementation of the UNDAF in 2001 will probably lead to the emergence of new forms of inter-agency cooperation and may, with the agreement of the Government, lead to improvements in the cooperation programme at the level of the annual planning of projects or during the mid-term review in 2003.

Goals and objectives of the country programme

13. Overall, the cooperation programme 2001-2005 will contribute to poverty reduction, the improvement of the living conditions of children and women in Burkina Faso and the implementation of their rights. The programme will aim for three results: (a) infants and young children surrounded by affection, physically healthy and mentally alert, socially stimulated and able to learn; (b) children, including the poorest and most disadvantaged, having access to good quality basic education and having completed it; and (c) healthy adolescents, inventive, energetic and able to contribute to the welfare of their families and the life of their communities.

14. More specifically, in the area of convergence, the cooperation programme will contribute, from the present to 2005, to: (a) improving the well-being and increasing the chances of survival of Burkinabian children and women through a 20 per cent reduction in infant-juvenile mortality, a 20 per cent reduction in maternal mortality and a reduction in morbidity related to water- and environment-borne disease; (b) improving the development of children and women by the acquisition of essential knowledge and skills through, inter alia an increase of 10 per cent in the gross school enrolment rate of children aged seven to 14, including girls, and the creation of an environment favourable to the development of children aged 0 to eight and of adolescents; and (c) supporting the efforts of the Government and civil society to develop a culture of law, applying the rights of children, adolescents and women and implementing measures of special protection in favour of particularly disadvantaged groups.

Links with national and international priorities

15. The objectives and strategies of the programme are based on the recent analysis of the situation of children and women in Burkina Faso and the lessons learned from past cooperation, including the guidelines adopted after the mid-term review. They are also based on: (a) the national policies, strategies and priorities; (b) the emergence of UNDAF; and (c) the medium-term plan and the actions in favour of children in the twenty-first century.

16. While supporting the decentralization process in progress, the programme will take its place in the new dynamic linked to the emergence of new programming frameworks, such as the poverty reduction strategy led by the Bretton Woods institutions and the sectoral investment programmes in the basic education and health sectors. In this respect, UNICEF will strengthen its participation in the various fora devoted to agreement on concerted action, such as the round tables on social sectors organized by the donors of funds, including the Government of the Netherlands.

17. The development of basic education constitutes a priority to which UNICEF intends to contribute, in the framework of the Education for All initiative, taking into account the experience acquired over the last five years in the implementation of innovative concepts such as the satellite schools. The importance attached by the Government and its main partners to reform of the health system based on the health district is an argument for the strong engagement of UNICEF in supporting the decentralized health system. The spread of the HIV/AIDS epidemic justifies the implementation of a global and multisectoral approach involving the health, education, protection and communication programmes within the regional conceptual framework and in cooperation with UNAIDS, UNFPA and WHO. In addition, the national goal, and the limited number of actors in the anti-dracunculiasis campaign justify a continuation of the support planned by the programme for the eradication of that illness. Lastly, taking into account the emergence of new social problems (child labour and the traffic in children), increasing urbanization and the destruction of traditional and family structures, and in order to contribute to poverty reduction, the programme will give special attention to groups needing special measures of protection, including adolescents.

Programme strategy

18. The programme strategy remains essentially the same as that described in the country note. The programme of cooperation will have five main strategic axes: (a) delivery of services by improving the geographic and economic access of the recipients to good-quality basic services; (b) increased national capacity-building, in particular through decentralized planning; (c) empowerment of participants, in particular women and young people by establishing innovative participatory approaches at the grass-roots level; (d) advocacy and communication in support of the programme; and (e) strengthening existing partnerships and the creation of new strategic alliances. In addition, the gender approach will be integrated into the entire programme of cooperation and will be implemented by strengthening the capacities of the partners, the empowerment of women and young girls and the creation of an environment favourable to the participation of women in the implementation of their rights.

19. The geographic convergence in 11 eastern provinces of the country initiated during the 1996-2000 programme will be maintained as a framework for priority intervention by the programme. However, this area, which remains rather broad, cannot be covered systematically by all of the programmes. In order to support basic services and community activities, as proposed by the programmes, intersectoral links may be established in a more limited priority area (four provinces), within which a systematic approach can be developed aiming not only to support infrastructures but to strengthen the operational capacity of the

school and health systems. Priority will be given in the allocation of the regular resources of the programme to the consolidation of activities in the four provinces of the priority area and the other resources will be allocated to the extension of those activities within the programme's area of convergence.

20. The intersectoral links thus created within a restricted priority area will make it possible to experiment, on a small scale, with the concept of integral development of the young child. This strategy will consist of integrating around the school a number of interventions furthering the integral development of children aged 0 to eight years. These interventions will include access to a minimum health care package at the level of the health stations; psychological and intellectual stimulation in the formal or non-formal preschool establishments (Bisongo); the acquisition of essential knowledge and skills in the schools (satellite or regular); the participation of communities and families; and access to a healthy environment through the establishment of adequate structures of sanitation and safe water supply. The strategy of integral development of the young child will thus constitute the glue for intersectoral cooperation at the decentralized level.

21. Basic education. Increasing the primary school attendance rates (40 per cent in 1998 and 33 per cent for girls) and keeping children in school will constitute a priority for the basic education programme. With the support of the Governments of Norway and the Netherlands and in partnership with WFP, French Cooperation and NGOs such as CATHWELL, the primary school project will contribute, in the area of convergence to increasing by 10 per cent the rate of enrolment of children aged seven to 14, particularly that of girls. The integration of the satellite school concept into the national educational system will be promoted by improving the quality, efficiency and yield of education; rationalizing the system of planning and management, especially at the decentralized level; increasing the availability of education; strengthening community capacities and establishing bridges to the traditional system. A functional education project for adolescents will make it possible to offer a minimum education to about 6,000 young people aged nine to 15 who are unenrolled or have dropped out, 50 per cent of them girls, in the Non-formal Basic Education Centres (NFBEC). In addition, the integral care of children aged three to six (Bisongo) experimented with in the satellite schools since 1998 will be pursued within the broader framework of a development strategy for young children aged 0 to eight based on the implementation of a multisectoral approach.

22. Health and nutrition. Taking into account the high levels of infant and maternal mortality aggravated by the spread of the HIV/AIDS epidemic and with a view to halting the considerable decline in the use of the health system by the population, the programme will contribute, in the spirit of the Bamako Initiative, to increasing access to, use and the quality of care of primary health care, including emergency obstetrical care, in three health regions of the area of convergence. In cooperation with UNFPA, WHO, UNAIDS, WFP and the World Bank, support for the development of the decentralized health system will be extended through: (a) strengthening the planning and management capacities of three regional health Directorates and 11 district pilot teams; (b) improving the quality of the minimum package of activities in 100 basic health centres; (c) the implementation, among adults and adolescents, of a global approach to

fighting HIV/AIDS (including the prevention of mother-child transmission) in three urban health districts; and (d) improving obstetrical care coverage and the involvement of communities in the management of health services in six health districts. At the national level, the programme will support the sectoral investment programme in cooperation with the other partners, mainly the World Bank, the European Union and the Government of the Netherlands. It will also contribute to strengthening the planning and management capacities of the Ministry of Health and revitalizing immunization activities through the Immunization Independence Initiative. In cooperation with the Helen Keller International Foundation, the programme will support the National Nutrition Centre in reducing micronutrient deficiencies, and contribute, with WHO, UNFPA and UNAIDS, to strengthening the operational capacities of the structures engaged in combating HIV/AIDS.

23. Water, sanitation and environment. The consumption of safe water by only one-quarter of the population and a rate of latrinization of 17 per cent contribute heavily to the precariousness of the population's health. In 1999, 182 villages reported 2,093 cases of dracunculiasis. In partnership with WHO, the Peace Corps and Global 2000, the programme will contribute to the total halting of dracunculiasis transmission between now and 2002, and its eradication between now and 2005. The eradication strategy will be based on epidemiological surveillance, systematic isolation of the cases detected, the provision of filtration sieves and the strengthening of community capacities in all the villages of the three hyper-endemic provinces situated in the area of convergence, which account for 75 per cent of the country's cases. Within the framework of intersectoral cooperation with the health and basic education programmes in the area of convergence, and in order to encourage school enrolment by girls, the project will strengthen the basic services ensuring the availability of latrines and safe water in all the satellite schools and the construction of latrines in the public schools and health installations. In addition, in order to contribute to integral early childhood development, the project will seek to improve the hygienic conditions, sanitation and access to safe water of 60,000 families. In cooperation with UNDP, support will be given to the Ministry of Water and the Environment and the regional water Directorates to strengthen the framework of concerted action necessary for strategic reflection in the sector.

24. Legal and socio-economic protection of children and women. This cross-sectoral programme will contribute both to ensuring application within the cooperation programme of the national and international legal instruments for the protection of children, adolescents and women and to implementing special protective measures for especially vulnerable groups. Complementing the interventions of the Governments of Denmark, France and the Netherlands and the International Labour Office (ILO), the legal protection project will contribute to inducing the population of the area of convergence to accept the provisions of the Personal and Family Code, reducing the number of children subjected to the worst forms of labour, especially in the domestic labour and gold-panning sectors and guaranteeing legal protection for all the minors and women held in the country's five penitentiary centres.

25. Within the framework of the socio-economic protection project, the programme will contribute in the area of convergence and in synergy with the

actions of the Governments of Denmark and the Netherlands, to the national objective of reducing the rate of prevalence of excision from 66 per cent to 25 per cent in the 21 provinces where the practice is most endemic. In urban areas, support will be given to about 10 national NGOs to reduce the risks of marginalization or exclusion for the orphans of parents who have died of AIDS, handicapped children and about 3,000 street children. In order to make operational intersectoral cooperation in the priority area, the programme will strengthen, within the network of women leaders, the skills of 10,000 women and young girls and facilitate their access to training, production and the micro-credit offered by the Government.

26. Communication for development. This programme will help provide the cooperation programme with the support required in the field of social communication and promote knowledge of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women. The communication project in support of the programme is intended, through the implementation of an Integral Communication Plan (ICP), to promote behavioural changes favourable to the survival, harmonious development and protection of children and women, to increase the capacities for social communication of the Ministry of Culture and Information, and to give specific support to the information, education and communication activities implemented as part of the anti-HIV/AIDS and dracunculiasis campaigns. In cooperation with Save the Children Alliance and Plan International, the advocacy project will encourage the participation of children and adolescents in the analysis of their problems and promotion of their rights through the Children's Parliament. It will also make use of the many special events organized in Burkina Faso every year to advocate in favour of the application of the rights of children and women and to mobilize the resources necessary for implementation of the programme.

27. Social planning, monitoring and evaluation. In interaction with the communication for development programme, this programme will support the annual planning of the cooperation programme, strengthen the regular monitoring, evaluation and documentation of its implementation and promote intersectoral cooperation between the decentralized government structures through specific support of two regional Directorates of studies and planning in the area of convergence. The programme will also promote research and documentation in the key fields relating to women and children, contribute to preparation for emergencies and monitor the implementation of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women.

28. Cross-sectoral costs will contribute to the implementation of the cooperation programme by assuming the cross-sectoral costs of technical and operational support staff.

Monitoring and evaluation

29. The integrated monitoring and evaluation plan will constitute the priority tool for monitoring and evaluating the programme and will ensure systematic disaggregation of the socio-economic data by sex, age and province. The plan provides for a mid-term review of the programme in 2003 and an end-of-cycle

review in 2005. The MICS 2000 will make it possible to collect the basic data in the area of convergence and to specify certain goals at the priority area level. An evaluation of the early childhood development project will be carried out at mid-term. The main indicators monitored include the rates of enrolment, school-leaving and success in primary education, the prevalence of HIV/AIDS, access to health services and immunization coverage, the prevalence of dracunculiasis and poliomyelitis, access to the sanitation structures and the prevalence of excision.

Cooperation with other partners

30. UNICEF will maintain close contact with all of the partners whose activities are complementary to the cooperation programme and will keep informed of the implications of their activities for the development of the social sectors and the poverty and debt reduction initiatives. This will include cooperation with the agencies of the United Nations system within UNDAF. More specifically, the health programme will continue its cooperation with the World Bank, the European Union and the Governments of France and the Netherlands in supporting reform of the health system. The basic education programme will be a part of the Basic Education Ten-year Plan, the external support for which is led by the Government of the Netherlands and the World Bank. It will also be complementary to the activities carried out by the European Union and the Government of France in the field of literacy and by the Governments of Germany, Austria and Switzerland in functional education. The sanitation, water and environment programme will operate in synergy, at the community level, with the water infrastructure programmes planned by the European Union, the French Development Agency and the Governments of Denmark and Japan. Regular contacts will be maintained with the United Nations Foundation as a part of the activities targeting adolescents, and with the NGOs, including the Peace Corps.

Management of the programme

31. The cooperation programme will be coordinated by the Ministry of Economy and Finances, through the General Directorate of Studies and Planning. A mid-year and annual review of the programme to which the partners will be invited, as well as regular consultations with the UNDAF Steering Committee, will be organized every year. At the regional and departmental levels, close cooperation will be encouraged between the decentralized State structures coordinated by the regional Directorates of Studies and Planning. At the community level, intersectoral links will be established through the revitalization of the women leaders' network, in association with the management committees of schools, health stations and water points, or with the associations of school parents and teacher mothers.

TABLE 1. BASIC STATISTICS ON CHILDREN AND WOMEN

Burkina Faso	(1998 and earlier years)		UNICEF country classification
Under-five mortality rate	165	(1998)	Very High U5MR
Infant mortality rate	109	(1998)	Very High IMR
GNP per capita	$ 240	(1998)	Low GNP
Total population	11.3 million	(1998)	

KEY INDICATORS FOR CHILD SURVIVAL AND DEVELOPMENT		1970	1980	1990	1998
Births	(thousands)	288	349	439	519
Infant deaths (under 1)	(thousands)	47	51	55	57
Under-five deaths	(thousands)	80	84	86	86
Under-five mortality rate (per 1,000 live births)		278	242	196	165
Infant mortality rate (under 1) (per 1,000 live births)		163	146	125	109

		About 1980	Most recent
Underweight children (under 5)	Moderate & severe	..	36 a/
(% weight for age, 1999)	Severe	..	14 a/
Babies with low birth weight (%, 1987)		..	21
Primary school children reaching grade 5 (%, 1980/1997*)		75	68

NUTRITION INDICATORS	About 1980	Most recent
Exclusive breast-feeding rate (<4 mos.) (%, 1999)	..	5
Timely complementary feeding rate (6-9 mos.) (%, 1999)	..	56
Continued breast-feeding rate (20-23 mos.) (%, 1993)	..	81
Prevalence of wasting (0-59 mos.) (%, 1999)	..	18 a/
Prevalence of stunting (0-59 mos.) (%,1999)	..	31 a/
Vitamin A supplementation coverage (6-59 mos.) (%, 1998)	..	97
Household consuming iodized salt (%, 1996)	..	23

HEALTH INDICATORS		About 1980	Most recent
ORT use rate (%, 1999)		..	18
Routine EPI vaccines financed by government (%, 1997)		..	100
Access to safe water	Total	30	42
(% of population, 1980/1996)	Urban/rural	27 / 31	66 / 37
Access to adequate sanitation	Total	..	34
(% of population, 1980/1996)	Urban/rural	38 / 5	39 / 27
Births attended by trained personnel (%, 1999)		..	27
Maternal mortality rate (per 100,000 live births)		..	..

IMMUNIZATION		1981	1985	1990	1998
One-year-old (%) immunized against:	Tuberculosis	16	17	84	72
	DPT	2	9	37	37
	Polio	2	10	37	42
	Measles	23	38	42	46
Pregnant women (%) immunized against:	Tetanus	11	4	76	54

a/ Under 3 years.

TABLE 1 (continued)

Burkina Faso

EDUCATION INDICATORS		About 1980	Most recent
Primary enrolment ratio (gross/net) (%, 1985/1997*)	Total	27 / 23	41 / 34
	Male	34 / 29	48 / 40
	Female	20 / 17	33 / 28
Secondary enrolment ratio (gross/net) (%, 1985/1993)	Total	4 / 3	8 / 7
	Male	6 / 5	11 / 9
	Female	3 / 2	6 / 5
Adult literacy rate, 15 years & older (%, 1985/1995)	Total	13	19
	Male/female	21 / 6	29 / 10
Radio/television sets (per 1,000 population, 1985/1996)		19 / 5	32 / 8

DEMOGRAPHC INDICATORS		1970	1980	1990	1998	2000
Total population	(thousands)	5424	6909	9060	11305	11937
Population aged 0-18 years	(thousands)	2759	3712	4895	6128	6465
Population aged 0-5 years	(thousands)	1062	1344	1761	2137	2235
Urban population (% of total)		6.0	8.0	14.0	17.3	18.0
Life expectancy at birth (years)	Total	39	44	45	45	45
	Male	38	43	44	44	44
	Female	41	45	47	45	46
Total fertility rate		7.7	7.8	7.3	6.5	6.3
Crude birth rate (per 1,000 population)		53	50	48	46	45
Crude death rate (per 1,000 population)		25	21	19	18	18

		About 1980	Most recent
Contraceptive prevalence rate (%, 1999)		..	12
Population annual growth rate (%, 1970-1990/1990-1998)	Total	2.6	2.8
	Urban	6.8	4.8

ECONOMIC INDICATORS		About 1980	Most recent
GNP per capita annual growth rate (%, 1965-1980/1990-1998)		1.7	1.1
Inflation rate (%, 1965-1980/1990-1998)		6	7
Population below $1 a day (%)		..	..
Household income share (%)	Top 20%/bottom 40%	.. / ..	.. / ..
Government expenditure (% of total expenditure, 1985/1992)	Health/education	6 / 18	7 / 17
	Defense	19	14
Household expenditure (% share of total, 1980 or 1985)	Health/education	.. / ..	.. / ..
Official development assistance: (1981/1998)	$US millions	217	397
	As % of GNP	17	15
Debt service (% of goods and services exports, 1982/1997)		8	11

* EFA 2000 database.

TABLE 2. EXPENDITURES UNDER PREVIOUS COOPERATION PERIOD, 1996-2000 a/

COUNTRY: BURKINA FASO
LATEST BOARD APPROVAL: 1995
REGULAR RESOURCES: $14,000,000.00

(In thousands of United States dollars)

Programme sectors/areas	Supplies and equipment (actual)		Training grants (actual)		Project staff (actual)		Other cash (actual)		TOTAL					
									Regular resources b/		Other resources		Total (RR & OR)	
									Actual	Planned	Actual	Planned	Actual	Planned
	RR b/	OR	RR b/	OR	RR b/	OR	RR b/	OR						
Health and nutrition	778	5 334	335	229	974	125	690	456	2 777	2 525	6 144	11 375	8 921	13 900
Water supply and sanitation	223	284	20	65	513	26	580	334	1 336	2 400	709	8 035	2 045	10 435
Education	512	2 901	118	448	422	89	263	881	1 315	2 500	4 319	9 510	5 634	12 010
Children in especially difficult circumstances	113	42	100	83	134	5	215	127	562	2 100	257	1 825	819	3 925
Social mobilization and advocacy	114		13		88		510		725	1 600		2 255	725	3 855
Planning and social statistics	176		76		168		431		851	1 125		1 375	851	2 500
Programme support	120				633		324		1 077	1 750			1 077	1 750
Emergency		123									123		123	
GRAND TOTAL	2 036	8 684	662	825	2 932	245	3 013	1 798	8 643	14 000	11 552	34 375	20 195	48 375

RR = Regular resources.
OR = Other resources.

a/ Actual expenditure includes expenditure recorded as of 31 May 2000.
b/ Actual GR expenditure includes allocations from global funds.

TABLE 3. PLANNED YEARLY EXPENDITURES

COUNTRY: BURKINA FASO
PROGRAMME CYCLE: 2001-2005

	FUND	2001	2002	2003	2004	2005	TOTAL
	RR	400 000	400 000	400 000	400 000	400 000	2 000 000
	FOR						
Social planning, monitoring and evaluation	NOR	90 000	90 000	90 000	90 000	90 000	450 000
	TOTAL	490 000	490 000	490 000	490 000	490 000	2 450 000
	RR	480 000	500 000	500 000	500 000	500 000	2 480 000
	FOR						
Communication for development	NOR	90 000	90 000	90 000	90 000	90 000	450 000
	TOTAL	570 000	590 000	590 000	590 000	590 000	2 930 000
	RR	660 000	680 000	680 000	690 000	690 000	3 400 000
	FOR						
Health and nutrition	NOR	1 240 000	1 320 000	1 520 000	1 520 000	1 480 000	7 080 000
	TOTAL	1 900 000	2 000 000	2 200 000	2 210 000	2 170 000	10 480 000
	RR	580 000	600 000	600 000	600 000	600 000	2 980 000
	FOR						
Basic education	NOR	1 220 000	1 270 000	1 570 000	1 560 000	1 520 000	7 140 000
	TOTAL	1 800 000	1 870 000	2 170 000	2 160 000	2 120 000	10 120 000
	RR	580 000	600 000	600 000	610 000	610 000	3 000 000
	FOR						
Sanitation, water and environment	NOR	370 000	390 000	430 000	430 000	430 000	2 050 000
	TOTAL	950 000	990 000	1 030 000	1 040 000	1 040 000	5 050 000
	RR	640 000	660 000	660 000	670 000	670 000	3 300 000
	FOR						
Legal and socio-economic protection	NOR	300 000	380 000	380 000	380 000	360 000	1 800 000
	TOTAL	940 000	1 040 000	1 040 000	1 050 000	1 030 000	5 100 000
	RR	389 000	405 000	402 000	392 000	392 000	1 980 000
	FOR						
Cross-sector costs	NOR	173 600	173 600	173 600	183 600	192 600	897 000
	TOTAL	562 600	578 600	575 600	575 600	584 600	2 877 000
	RR	3 729 000	3 845 000	3 842 000	3 862 000	3 862 000	19 140 000
	FOR						
Total, Programme budget	NOR	3 483 600	3 713 600	4 253 600	4 253 600	4 162 600	19 867 000
	TOTAL	7 212 600	7 558 600	8 095 600	8 115 600	8 024 600	39 007 000
Staff costs a/		747 937	825 322	855 158	874 985	895 590	4 198 992
General operating costs		288 637	336 800	322 884	341 058	352 824	1 642 203
Total, estimate support budget		1 036 574	1 162 122	1 178 042	1 216 043	1 248 414	5 841 195
GRAND TOTAL		8 249 174	8 720 722	9 273 642	9 331 643	9 273 014	44 848 195

RR = regular resources.
FOR = funded other resources.
NOR = new other resources.

a/ including consultants and temporary assistance

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TABLE 4

COUNTRY BURKINA FASO
PROGRAMME 2001-2005

LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

PROGRAMME SECTION/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET				POSTS a/										STAFF COSTS b/		
	RR	FOR	NOR	TOTAL	D2/L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP	LOCAL	TOTAL
REGULAR RESOURCES:																	
SOCIAL PLANNING, MONITORING AND EVALUATION	2 000 000			2 000 000	0	0	0	0	0	0	0	1	1	2	0	283 679	283 679
COMMUNICATION FOR DEVELOPMENT	2 480 000			2 480 000	0	0	0	0	0	0	0	1	1	2	0	240 886	240 886
HEALTH AND NUTRITION	3 400 000			3 400 000	0	0	0	1	0	0	1	0	1	2	867 008	94 948	961 956
BASIC EDUCATION	2 980 000			2 980 000	0	0	0	1	0	0	1	0	1	2	867 008	94 948	961 956
SANITATION, WATER AND ENVIRONMENT	3 000 000			3 000 000	0	0	0	0	1	0	1	0	0	1	776 055	0	776 055
LEGAL AND SOCIO-ECONOMIC PROTECTION	3 300 000			3 300 000	0	0	0	0	0	0	0	2	1	3	0	467 022	467 022
CROSS-SECTOR COSTS	1 980 000			1 980 000	0	0	0	0	0	0	0	1	11	12	0	766 626	766 626
TOTAL RR	19 140 000			19 140 000	0	0	0	2	1	0	3	5	16	24	2 510 071	1 948 109	4 458 180
OTHER RESOURCES:																	
SOCIAL PLANNING, MONITORING AND EVALUATION		0	450 000	450 000	0	0	0	0	0	0	0	1	0	1	0	120 748	120 748
COMMUNICATION FOR DEVELOPMENT		0	450 000	450 000	0	0	0	0	0	0	0	0	0	0	0	0	0
HEALTH AND NUTRITION		0	7 080 000	7 080 000	0	0	0	0	0	0	0	1	0	1	0	188 731	188 731
BASIC EDUCATION		0	7 140 000	7 140 000	0	0	0	0	0	0	0	2	1	3	0	379 785	379 785
SANITATION, WATER AND ENVIRONMENT		0	2 050 000	2 050 000	0	0	0	0	0	0	0	1	2	3	0	255 775	255 775
LEGAL AND SOCIO-ECONOMIC PROTECTION		0	1 800 000	1 800 000	0	0	0	0	0	0	0	0	0	0	0	0	0
CROSS-SECTOR COSTS		0	897 000	897 000	0	0	0	1	0	0	1	0	0	1	867 008	0	867 008
TOTAL OR		0	19 867 000	19 867 000	0	0	0	1	0	0	1	5	3	9	867 008	945 039	1 812 047
TOTAL RR & OR	19 140 000	0	19 867 000	39 007 000	0	0	0	3	1	0	4	10	19	33	3 377 079	2 893 148	6 270 227
SUPPORT BUDGET			Operating costs Staffing	1 642 203	0	0	1	1	1	0	3	3	11	17	2 652 735	1 546 257	4 198 992
GRAND TOTAL (RR + OR + SB)					0	0	1	4	2	0	7	13	30	50	6 029 814	4 439 405	10 469 219
	Number of posts and staff costs: Current programme cycle At the end of proposed programme cycle (indicative only)										7 7	11 13	29 30	47 50	6 029 814	4 439 405	10 469 219

RR = regular resources.
OR = other resources.
FOR = funded other resources.
NOR = new other resources.
IP = international Professional.
NP = national Professional.
GS = General Service.
SB = support budget

a/ Each post, regardless of its funding source, supports the country programme as a whole.
b/ Excludes temporary assistance and overtime.